

BEST AVAILABLE COPY

| CLAIMS ONLY | | | | | | SERIAL NO. | | FILING DATE | | | |
|--------------|----------|------|------------------------|------|------------------------|--------------|--|-------------|------|------|------|
| | | | | | | APPLICANT(S) | | | | | |
| CLAIMS | | | | | | | | | | | |
| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | * | * | * | |
| | IND. | DEP. | IND. | DEP. | IND. | DEP. | | IND. | DEP. | IND. | DEP. |
| 1 | | | | | | | | | | | |
| 2 | | | | | | | | | | | |
| 3 | | | | | | | | | | | |
| 4 | | | | | | | | | | | |
| 5 | | | | | | | | | | | |
| 6 | | | | | | | | | | | |
| 7 | | | | | | | | | | | |
| 8 | | | | | | | | | | | |
| 9 | | | | | | | | | | | |
| 10 | / | | | | | | | | | | |
| 11 | / | - | | | | | | | | | |
| 12 | / | - | | | | | | | | | |
| 13 | / | - | | | | | | | | | |
| 14 | / | - | | | | | | | | | |
| 15 | / | - | | | | | | | | | |
| 16 | / | - | | | | | | | | | |
| 17 | / | - | | | | | | | | | |
| 18 | / | - | | | | | | | | | |
| 19 | / | - | | | | | | | | | |
| 20 | / | - | | | | | | | | | |
| 21 | / | - | | | | | | | | | |
| 22 | / | - | | | | | | | | | |
| 23 | / | - | | | | | | | | | |
| 24 | / | - | | | | | | | | | |
| 25 | / | - | | | | | | | | | |
| 26 | / | | | | | | | | | | |
| 27 | / | - | | | | | | | | | |
| 28 | / | - | | | | | | | | | |
| 29 | / | - | | | | | | | | | |
| 30 | / | - | | | | | | | | | |
| 31 | / | - | | | | | | | | | |
| 32 | / | - | | | | | | | | | |
| 33 | / | - | | | | | | | | | |
| 34 | / | | | | | | | | | | |
| 35 | / | - | | | | | | | | | |
| 36 | / | - | | | | | | | | | |
| 37 | / | - | | | | | | | | | |
| 38 | / | - | | | | | | | | | |
| 39 | / | - | | | | | | | | | |
| 40 | / | - | | | | | | | | | |
| 41 | / | - | | | | | | | | | |
| 42 | / | | | | | | | | | | |
| 43 | | | | | | | | | | | |
| 44 | | | | | | | | | | | |
| 45 | | | | | | | | | | | |
| 46 | | | | | | | | | | | |
| 47 | | | | | | | | | | | |
| 48 | | | | | | | | | | | |
| 49 | | | | | | | | | | | |
| 50 | | | | | | | | | | | |
| TOTAL IND. | 4 | | | | | | | | | | |
| TOTAL DEP. | 09 | | | | | | | | | | |
| TOTAL CLAIMS | 30 | | | | | | | | | | |

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS